



Congratulations on being approved for a Section 8 Housing Choice Voucher!

SECTION 8
HOUSING CHOICE
VOUCHER
BRIEFING

CDA-CITY OF MADISON

215 MARTIN LUTHER KING JR. BLVD. STE 161

MADISON, WI 53703

PHONE: (608) 266-4675

FAX: (608) 264-9291

WEBSITE:

[HTTPS://WWW.CITYOFMADISON.COM/DPCED/
HOUSING](https://www.cityofmadison.com/dpced/housing)

GOALS FOR TODAY:



To learn how the Section 8 Program (also known as “Housing Choice Voucher” program) functions



To take the information learned today to successfully use your voucher and fulfill your responsibilities as a voucher holder



To review, initial, sign and date my **Responsibility Agreement and Briefing Certificate – and submit copies to CDA by my assigned due date**

RESPONSIBILITY AGREEMENT

- EACH NUMBERED ITEM WILL BE REVIEWED
- PLEASE WRITE DOWN ANY QUESTIONS YOU MAY HAVE FOR YOUR ASSIGNED HOUSING SPECIALIST TO REVIEW WITH THEM AFTER RECEIVING YOUR VOUCHER
- PLEASE INITIAL EACH NUMBERED ITEM AS REVIEWED – all items must be initialed (Only the head-of-household needs to initial)
- SIGN AND DATE FORM (ALL ADULTS in the household)
 - ALL ADULTS IN THE HOUSEHOLD ARE RESPONSIBLE TO UNDERSTAND AND ABIDE BY THE INFORMATION SET FORTH ON THE VOUCHER AND RESPONSIBILITY AGREEMENT
- **A COPY OF THIS FORM MUST BE RETURNED TO CDA BY THE ASSIGNED DUE DATE ON YOUR VOUCHER BRIEFING LETTER IN ORDER TO RECEIVE YOUR ACTUAL VOUCHER PAPERWORK.**



1. I must abide by all of the family obligations listed on the voucher. Violation of any family obligation can be cause for termination from the program.

2. I must provide only true and complete information to the CDA.

3. I must receive written approval from CDA and the landlord before anyone can move in with me. I will not allow anyone not on my voucher/lease to use my address for any purpose.

4. I must notify CDA in writing within 10 days of the birth, adoption or court awarded custody of a child and/or if any household member leaves the unit.

5. In order to remove a household member who has income, I must provide CDA with verification of where that person now resides.

6. I must notify CDA in writing within 10 days of ALL changes in household income, including income of minor children and full-time students.

7. If I report a decrease to my household income, I will need to provide verification of the decrease to CDA. I understand that it may take up to 60 days for CDA to process the change (after receiving the verification), and the change may be processed retroactively to the first of the month after it was reported.

8. If I do not properly report an increase to household income, I will be required to pay back the CDA any excess monies paid to the landlord. I may also be removed from the Section 8 program.

9. IF THE AMOUNT OF HOUSING
SUBSIDY PROVIDED BY CDA IS REDUCED
TO ZERO, I UNDERSTAND THAT MY
PARTICIPATION IN THE VOUCHER
PROGRAM WILL AUTOMATICALLY BE
TERMINATED 180 DAYS AFTER THE LAST
SUBSIDY PAYMENT.

10. If I have out-of-pocket child-care expenses for children in my household under the age of 13 due to employment, seeking employment or attending school, I must report and provide verification in order to receive a reduction in my rent.

11. I will sign a lease agreement with the landlord, and I am obligated to live by ALL the rules and conditions of the lease (ie: paying rent on time, no unauthorized people living in my unit, paying utilities, etc.)

12. I can be terminated from the Section 8 program for serious or repeated violations of the lease agreement with the landlord.

13. I will provide CDA with copies of any lease violation or eviction notices and any eviction related court documentation.

14. If evicted in court, I may be terminated from the Section 8 program.

15. I may be terminated from the Section 8 program if I move out of my assisted unit without prior approval by CDA

16. I must obtain approval from CDA before signing any leases/renewals with the landlord.

17. I must obtain CDA approval for ANY additional money paid to the landlord beyond CDA approved rent and utilities. CDA must approve the landlord providing me with a rent credit for work done on property.

18. I cannot sublease
the assisted unit or any
part of the assisted unit.

19. Upon moving to a new unit, I will not be permitted to move within the initial lease term in the lease agreement. CDA will not approve a lease agreement rescission between myself and the landlord during this initial term.

20. I must notify CDA in writing of my intention to move at least 60 days before my intended vacate date.

21. I will not be issued a moving voucher until BOTH of the following occur:

1) It is confirmed that I provided proper notice to my landlord

2) I have provided CDA with all necessary paperwork and income/asset/expense verification.

22. I am responsible for my household members and guests of all ages. If any participate in any illegal drug or violent criminal activity, my entire household can be terminated from the Section 8 program.

23. If I or any household members/guests threaten, verbally abuse or commit actual violence to any CDA staff, termination of my participation in the Section 8 program will begin.


24. I understand I have the right to an informal meeting/hearing when there is a disagreement between the CDA and myself over these rules, or if CDA begins termination of my Section 8 participation.

Elderly and disabled Households only

25. If I have out-of-pocket medical expenses that I would like to be counted as a deduction to my rent calculation, I will provide verification of the medical expenses to the CDA.

I HAVE READ, INITIALED, SIGNED
AND DATED THIS AGREEMENT.

I understand I can reach out to my
future assigned Section 8 Housing
Specialist with any questions
regarding this agreement.



After completing this briefing and submitting your documentation, your CDA Housing Specialist will send you the following documents to begin your housing search:



VOUCHER



REQUEST FOR TEANANCY
APPROVAL (RFTA)



GROSS RENT VOUCHER
LIMIT CALCULATION



UTILITY ALLOWANCE
WORKSHEETS

VOUCHER (form HUD-52646)

- 1) Your assigned voucher size
- 2) Date your voucher is issued
- 3) 60 days from date of issuance
- 4) If you are approved for a voucher extension, it will be listed here in the future
- 5) Name of the Head of household
- 6) Signature/date of Head of household
- 7) CDA-City of Madison
- 8) Name of your assigned CDA Housing Specialist
- 9) Signature and date of your CDA Housing Specialist

Voucher Housing Choice Voucher Program

U.S. Department of Housing
and Urban Development

OMB No. 2577-0169
(exp. 04/30/2026)

Office of Public and Indian Housing

OMB Burden Statement: The public reporting burden for this information collection is estimated to be up to 0.05 hours, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This collection of information is required for participation in the housing choice voucher program. Assurances of confidentiality are not provided under this collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Office of Public and Indian Housing, U.S. Department of Housing and Urban Development, Washington, DC 20410. HUD may not conduct and sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid control number.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect the information on this form by 24 CFR § 982.302. The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. The Personally Identifiable Information (PII) data collected on this form are not stored or retrieved within a system of record.

Please read entire document before completing form Fill in all blanks below. Type or print clearly.		Voucher Number
1. Insert unit size in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)		1. Unit Size
2. Date Voucher Issued (mm/dd/yyyy) Insert actual date the Voucher is issued to the Family.		2. Issue Date (mm/dd/yyyy)
3. Date Voucher Expires (mm/dd/yyyy) must be at least sixty days after date Voucher is issued. (See Section 6 of this form.)		3. Expiration Date (mm/dd/yyyy)
4. Date Extension Expires (if applicable)(mm/dd/yyyy) (See Section 6. of this form)		4. Date Extension Expires (mm/dd/yyyy)
5. Name of Family Representative	6. Signature of Family Representative	Date Signed (mm/dd/yyyy)
7. Name of Public Housing Agency (PHA)		
8. Name and Title of PHA Official	9. Signature of PHA Official	Date Signed (mm/dd/yyyy)

VOUCHER EXTENSION REQUESTS



Must be submitted in writing

The voucher expiration date is the due date for submission of the Request for Tenancy Approval (RFTA) form and one-year, unsigned lease



Must be submitted before the voucher expires

The unit does not need to be inspected by the expiration date



Up to 2 additional 30-day extensions may be approved for a total voucher search time of 120 days

The lease does not need to begin before the expiration date



If additional time is still needed, approval will need to be processed through a reasonable accommodation request

Once you submit the RFTA/lease, the time on the voucher “clock” stops; if the unit does not work out, you will be provided with an extension for the number of days that remained on your voucher when the paperwork was submitted

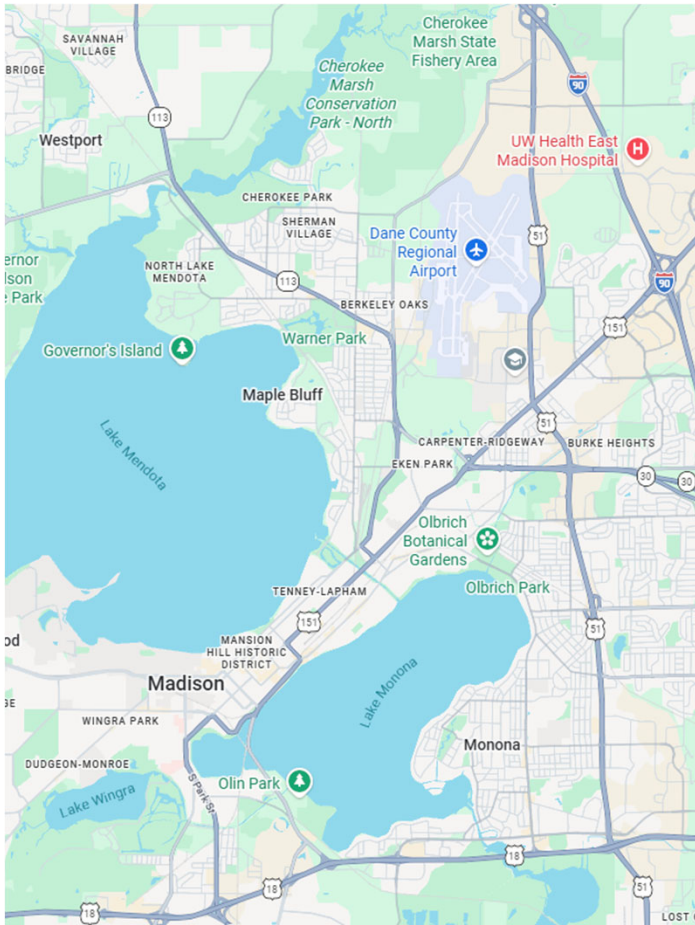
Where can I use my voucher?

The CDA-City of Madison's jurisdiction includes units that are found within the City of Madison limits only!

To check if a unit is within the City limits you can search for an address at: <https://www.cityofmadison.com/assessor>

- If the search provides property details → the unit IS within the CDA jurisdiction.
- If the search states “no property information was found based on your search → the unit IS NOT within the CDA jurisdiction*"

*You might be able to transfer your voucher to the Dane County Housing authority to lease up in their jurisdiction



PORTABILITY:

ability to transfer housing voucher assistance from one housing authority jurisdiction to another with a housing voucher program

PORTABILITY AT ADMISSION

- ❖ Each housing authority determines in their Administrative Plan if an applicant voucher holder is able to port their voucher at admission

- ❖ CDA's Administrative Plan states:

“If neither the head of household nor the spouse/co-head of an applicant family had a domicile (legal residence) in the CDA's jurisdiction at the time of submission of the family's full application (not at the time of the family's entry into the lottery), the family must live in the CDA's jurisdiction with voucher assistance for at least 12 months before requesting portability”

PORTABILITY AFTER INITIAL LEASE-UP

- ❖ At your annual recertification and coming up to completing your lease term, you can request a moving-voucher

- ❖ You can request to port this voucher to another housing authority jurisdiction

Things to remember about Portability:

- Your voucher size will be determined by the housing authority that is receiving you and your voucher (it could be smaller!)
- Your voucher limit will be determined by the housing authority that is receiving you and your voucher (it could be more or less depending on their payment standards and the voucher size issued to you)
- Portability takes time! You may be required to complete a portability application, attend a briefing in person, etc. In addition to that...
- You will still need to find a unit, apply and get approved for it, have the housing provider complete and submit the paperwork and the unit needs to pass inspection/rent be approved **before** you can be moving in

Portability Request form

To be completed and submitted to your housing specialist to let us know where you would like CDA to send your paperwork



CommunityDevelopmentAuthority

Madison Municipal Building, Suite 161
215 Martin Luther King, Jr. Boulevard
Madison, Wisconsin 53703
ph (608)266-4675 fx (608)264-9291
email housing@cityofmadison.com
mail P.O. Box 1785, Madison, WI 53701-1785

PORTABILITY REQUEST

Name (please print): _____
Street Address: _____
City, State, Zip code: _____
Phone Number: _____
Email address: _____

Current lease expiration date: _____
Desired vacate date: _____

I am requesting that the CDA-City of Madison transfer my housing choice voucher to:

Housing Authority Name: _____
Address: _____
City, State Zip Code: _____
Telephone #: _____ Fax #: _____
Contact Person's name: _____
E-Mail Address: _____

By signing this document, I certify the following:

- a) I have provided my landlord with proper notice to vacate my subsidized unit/I am moving at the end of my current lease term
- b) I am in good standing with the CDA-City of Madison
- c) I understand that if I stay in my current subsidized unit after the vacate date, I will be responsible for paying the full amount of contract rent to the landlord/owner.

Signed: _____ Date _____

VOUCHER SIZES

Exceptions to your assigned voucher size must be requested in writing to your housing specialist and will be processed as a reasonable accommodation as to accommodate a disabled household members disability, medical or health condition

The CDA Reasonable Accommodation Specialist must be able to make a connection between the need for an additional room and the disability

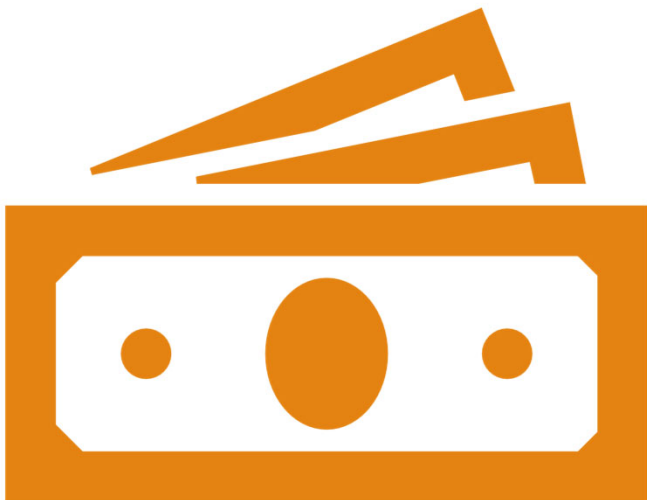
- 1 bedroom on the voucher will be provided for each two persons within the household
- Exception: Persons of different generations and opposite sex (other than spouses and children under age 6) will be provided 1 bedroom each on the voucher

HOH= Head of Household

- Example 1: HOH and One child → 2-bedroom
- Example 2: HOH and 2 female siblings → 2-bedroom
- Example 3: HOH, 1 male (8 y/o), 1 female (4 y/o) → 3 bedroom
- Example 4: HOH, 1 male (3 y/o), 1 female (4 y/o) → 2 bedroom
- Example 5: Married couple → 1- bedroom
- Example 6: HOH, other adult of different sex, 2 males (8 y/o), 1 female (4 y/o) → 4- bedroom

Voucher Size	Payment Standard [City/Downtown (53715 & 53703)] Voucher limit if at \$0 income
1	\$1,600 / \$1,800
2	\$1,850 / \$2,100
3	\$2,400 / \$2,700
4	\$2,700 / \$3,000
5	\$3,100 / \$3,750
6	\$3,500 / \$4,850

CDA-City of
Madison Payment
Standards
As of 07/01/2026



Gross Rent

Gross rent = contract rent + utility allowance for unit

IF THE HOUSING PROVIDER HAS ANY NON-NEGOTIABLE FEES THAT ARE CHARGED SEPARATELY FROM THE RENT, WE WILL ADD THESE FEES TO THE CONTRACT RENT TO GET THE GROSS RENT (IE: PEST CONTROL, TRASH, AMENITY FEES, ETC.)

UTILITY ALLOWANCE WORKSHEETS

3 Different types of unit types/worksheets:

- MULTI-UNIT STRUCTURES
- DUPLEX, TOWNHOUSE/ROWHOUSE
- DETACHED UNITS

****Make sure to utilize the worksheet that matches with the unit type you are looking to rent****

- What bedroom size utility should be used?
 - The bedroom size utility is *usually* equal to voucher size... *however*,
 - If you are looking at a unit smaller than your voucher size, use the actual unit size
 - If you are looking at a unit larger than your voucher size, use your voucher size
- Circle the utilities that the tenant is required to pay. The total of these is the unit Utility Allowance or “Tenant Paid Utilities”.

UTILITY SERVICE/ APPLIANCE	1-BR	2-BR	3-BR	4-BR	5-BR	6-BR
HEAT						
Natural Gas	26.00	31.00	36.00	40.00	45.00	50.00
Electric	76.00	89.00	102.00	116.00	129.00	142.00
COOKING FUEL						
Natural Gas	2.00	3.00	3.00	4.00	5.00	6.00
Electric	6.00	9.00	12.00	15.00	18.00	21.00
HOT WATER						
Natural gas	6.00	8.00	11.00	13.00	16.00	19.00
Electric	22.00	28.00	34.00	40.00	46.00	52.00
LIGHTING AND REFRIGERATION						
	36.00	50.00	64.00	78.00	92.00	106.00
WATER & SEWER						
	39.00	49.00	63.00	77.00	94.00	111.00
AIR CONDITIONING						
	3.00	6.00	10.00	13.00	17.00	21.00
BASE CHARGES – include a base charge if any of the above services uses natural gas, electricity or both.						
Natural Gas	22.00	22.00	22.00	22.00	22.00	22.00
Electric	20.00	20.00	20.00	20.00	20.00	20.00

1. Monthly rent \$ _____
2. Tenant paid Utilities (total of all circled utilities) \$ _____
3. Gross Rent (Total of lines 1 and 3) \$ _____
4. The amount of line 3 must be equal to or less than your rent and tenant paid utility limit.

Gross Rent Voucher Limit Calculations

The Gross Rent Voucher Limit for each voucher family varies!

Your voucher limit is determined by:

Payment standard of issued voucher size

+

10% of the household monthly
adjusted income

Example

Voucher size issued: 3 bedroom

Payment standard for 3 bedroom: \$2400

10% of monthly adjusted income: \$100

Gross Rent Voucher Limit → \$2500

This means that the contract rent + the utility allowance for the unit cannot total more than \$2500



Phone (608) 266.4675 Fax (608) 264.9291
Email housing@cityofmadison.com
Mail P.O. Box 1785, Madison, WI 53701-1785

Voucher Limit for: Voucher Holder Head of Household Name

CITY OF MADISON (except 53715 & 53703)
Payment Standard

The HUD Payment Standard for a 3-bedroom voucher in the City of Madison is: \$2400
(If you had \$0 income, this would be your limit)

Since you have income, the following applies to you at this time:

Your GROSS RENT LIMIT for a 3-bedroom unit is \$2500

DOWNTOWN (53715 & 53703 only)
Payment Standard

Leases starting 3/1, the HUD Payment Standard for a 3-bedroom voucher in 53715 & 53703 is: \$2700
(If you had \$0 income, this would be your limit)

Since you have income, the following applies to you at this time:

Your GROSS RENT LIMIT for a 3-bedroom unit is \$2800

Gross Rent = Contract Rent + Utility Allowance for unit

Use the enclosed Utility Allowance charts to calculate the Utility Allowance for the unit you wish to rent

If the Gross Rent is over your Gross Rent Limit, CDA **cannot** approve your move.

At this time your **gross** annual verified income is \$12,400 and your adjusted monthly income is \$1000 based on documentation that was submitted.

With your current income, your portion of rent AND estimated utilities will be: between \$300-\$400 (30% to 40% of your adjusted monthly income).

Your exact portion of rent and utilities depends on the actual unit you select.

You can rent a unit **larger** than your voucher if it does not exceed your **Gross Rent Limit**.
If you wish to rent a unit **smaller** than your voucher, your limit will be lower and CDA will pay less.
You must contact me if you decide to rent a unit that is smaller than your voucher size as the gross rent limit will be less

Please contact me with any questions you may have in the process.

Housing Specialist Name
CDA Housing Specialist

Phone: 608-222-2222 Fax: 608-266-4735

Gross Rent Voucher Limit Calculation

You will be provided with 2 different voucher limits:

- For units within the general City of Madison area (box on the left)
- For units in the 53715 & 53703 zip codes **ONLY** (box on the right)

The rest of the document will provide:

- An overview of your household income
- 30%-40% of your monthly adjusted income amounts
- Information on renting a unit larger or smaller than your assigned voucher size
- Contact information of your CDA Housing Specialist

Things to Keep In Mind...

- ❖ If the gross rent of the assisted unit is at or below the payment standard of the voucher size, the family will contribute 30% of their monthly adjusted income toward rent + estimated tenant-paid utilities
 - *This is the minimum a family will contribute (unless at the \$50 minimum tenant contribution)*
- ❖ When a voucher holder has income and moves into a new approved unit, the maximum they can contribute is 40% of their monthly adjusted income toward rent + estimated tenant-paid utilities
 - *If a unit would require more than 40%, the unit will NOT be inspected or further processed by CDA*
- ❖ After a family has been in a unit and their circumstances change (ie: income decreases, voucher size decreases, contract rent increases), they could end up contributing more than 40%.
 - *If a family's income goes down to \$0, this does NOT guarantee that their rent + estimated tenant-paid utilities will decrease to \$0.*



Minimum Rent Hardship Exemption

If 30% of the monthly adjusted income of a family is less than \$50, CDA has a minimum monthly tenant (voucher holder) contribution of \$50.

In the event that the family is not able to contribute the \$50 minimum due to one of the situations below, they may be exempt from contributing the \$50 for a certain time period until their financial situation changes:

- 1) They lost ability for or are awaiting eligibility for a federal, state or local assistance program (ie: Social Security, Unemployment, etc.)
- 2) The family's income has decreased because of changed family circumstances (ie: lost job, unemployment/child support ended)
- 3) A death has occurred in the assisted family household
- 4) The family would be evicted because it is unable to pay the minimum-rent (ie: has received a 5-day notice)
- 5) The family has experienced other circumstances determined by CDA

**The family must submit a Minimum Rent Hardship Exemption form along with supporting documentation for processing and potential approval.

Request for Tenancy Approval (form HUD-52517)

****To be completed by the Housing Provider****

- 1) CDA will be listed along with the name/email/telephone of your assigned CDA housing specialist
- 2) Address of proposed unit
- 3) Start date of the proposed lease
- 4) Number of bedrooms in the unit
- 5) The year the unit was built
- 6) The proposed amount of the contract rent
- 7) The amount of security deposit listed on the lease
- 8) The date the unit will be ready to be inspected

Request for Tenancy Approval Housing Choice Voucher Program

U.S. Department of Housing and
Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0169
exp. 04/30/2026

When the participant selects a unit, the owner of the unit completes this form to provide the PHA with information about the unit. The information is used to determine if the unit is eligible for rental assistance.

1. Name of Public Housing Agency (PHA)			2. Address of Unit (street address, unit #, city, state, zip code)			
3. Requested Lease Start Date	4. Number of Bedrooms	5. Year Constructed	6. Proposed Rent	7. Security Deposit Amt	8. Date Unit Available for Inspection	
9. Structure Type			10. If this unit is subsidized, indicate type of subsidy:			
<input type="checkbox"/> Single Family Detached (one family under one roof) <input type="checkbox"/> Semi-Detached (duplex, attached on one side) <input type="checkbox"/> Rowhouse/Townhouse (attached on two sides) <input type="checkbox"/> Low-rise apartment building (4 stories or fewer) <input type="checkbox"/> High-rise apartment building (5+ stories) <input type="checkbox"/> Manufactured Home (mobile home)			<input type="checkbox"/> Section 202 <input type="checkbox"/> Section 221(d)(3)(BMIR) <input type="checkbox"/> Tax Credit <input type="checkbox"/> HOME <input type="checkbox"/> Section 236 (insured or uninsured) <input type="checkbox"/> Section 525 Rural Development <input type="checkbox"/> Other (Describe Other Subsidy, including any state or local subsidy) _____			
11. Utilities and Appliances						
The owner shall provide or pay for the utilities/appliances indicated below by an "O". The tenant shall provide or pay for the utilities/appliances indicated below by a "T". Unless otherwise specified below, the owner shall pay for all utilities and provide the refrigerator and range/microwave.						
Item	Specify fuel type				Paid by	
Heating	<input type="checkbox"/> Natural gas	<input type="checkbox"/> Bottled gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Heat Pump	<input type="checkbox"/> Oil	<input type="checkbox"/> Other
Cooking	<input type="checkbox"/> Natural gas	<input type="checkbox"/> Bottled gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Other		
Water Heating	<input type="checkbox"/> Natural gas	<input type="checkbox"/> Bottled gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Oil	<input type="checkbox"/> Other	
Other Electric						
Water						
Sewer						
Trash Collection						
Air Conditioning						
Other (specify)						
Refrigerator						
Range/Microwave			Provided by			

Request for Tenancy Approval (form HUD-52517)

****To be completed by the Housing Provider****

- 9) The type of structure the unit is in needs to be identified
- 10) If applicable, any type of subsidy needs to be disclosed
- 11) All utility related information needs to be identified: type of energy used (usually natural gas or electric) and who is responsible to pay for each utility/appliance (the tenant or owner)

Request for Tenancy Approval
Housing Choice Voucher Program

U.S Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0169
exp. 04/30/2026

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Item	Specify fuel type					Paid by
Heating	<input type="checkbox"/> Natural gas	<input type="checkbox"/> Bottled gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Heat Pump	<input type="checkbox"/> Oil	<input type="checkbox"/> Other
Cooking	<input type="checkbox"/> Natural gas	<input type="checkbox"/> Bottled gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Other		
Water Heating	<input type="checkbox"/> Natural gas	<input type="checkbox"/> Bottled gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Oil <input type="checkbox"/> Other		
Other Electric	[REDACTED]					
Water						
Sewer						
Trash Collection						
Air Conditioning						
Other (specify)						
Refrigerator						Provided by
Range/Microwave						

Previous editions are obsolete 1 HUD-52517 (04/2023)

Request for Tenancy Approval (form HUD-52517)

****To be completed by the Housing Provider****

12. Owner's Certifications

- a) The owner may provide information about other rental units rent amounts
- b) Owner reads/acknowledges
- c) Owner must complete regarding Lead-Based Paint and the unit

13.-15. Owner reads/acknowledges

*Owner completes bottom left-hand corner information

You must complete, sign and date the bottom right-hand corner information and return the form along with a copy of the proposed one-year, unsigned lease

12. Owner's Certifications

- a. The program regulation requires the PHA to certify that the rent charged to the housing choice voucher tenant is not more than the rent charged for other unassisted comparable units. Owners of projects with more than 4 units must complete the following section for most recently leased comparable unassisted units within the premises.

Address and unit number	Date Rented	Rental Amount
1.		
2.		
3.		

- b. The owner (including a principal or other interested party) is not the parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the PHA has determined (and has notified the owner and the family of such determination) that approving leasing of the unit, notwithstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.

c. Check one of the following:

- Lead-based paint disclosure requirements do not apply because this property was built on or after January 1, 1978.
- The unit, common areas servicing the unit, and exterior painted surfaces associated with such unit or common areas have been found to be lead-based paint free by a lead-based paint inspector certified under the Federal certification program or under a federally accredited State certification program.
- A completed statement is attached containing disclosure of known information on lead-based paint and/or lead-based paint hazards in the unit, common areas or exterior painted surfaces, including a statement that the owner has provided the lead hazard information pamphlet to the family.

13. The PHA has not screened the family's behavior or suitability for tenancy. Such screening is the owner's responsibility.

14. The owner's lease must include word-for-word all provisions of the HUD tenancy addendum.

15. The PHA will arrange for inspection of the unit and will notify the owner and family if the unit is not approved.

OMB Burden Statement: The public reporting burden for this information collection is estimated to be 0.5 hours, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Collection of information about the unit features, owner name, and tenant name is voluntary. The information sets provides the PHA with information required to approve tenancy. Assurances of confidentiality are not provided under this collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Office of Public and Indian Housing, US Department of Housing and Urban Development, Washington, DC 20410. HUD may not conduct and sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid control number.

Privacy Notice: The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by 24 CFR 982.302. The form provides the PHA with information required to approve tenancy. The Personally Identifiable Information (PII) data collected on this form are not stored or retrieved within a system of record.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §§ 3729, 3802).

Print or Type Name of Owner/Owner Representative		Print or Type Name of Household Head	
Owner/Owner Representative Signature		Head of Household Signature	
Business Address		Present Address	
Telephone Number	Date (mm/dd/yyyy)	Telephone Number	Date (mm/dd/yyyy)

Things to remember about your Request for Tenancy Approval (RFTA) form:

- ✓ Only provide your RFTA to a housing provider after you know the unit fits within your limit, you have been fully approved by the housing provider and you are confident this is where you want to use your voucher (if multiple RFTA forms are received by CDA we will process the first one that is received)
- ✓ We will not process a RFTA until it is completed (all the information from the housing provider and you have completed/signed/dated your section on page 2) AND we have a copy of the proposed one-year, unsigned lease
 - If you are currently in the middle of a lease and your current unit: 1) is within the City of Madison; 2) fits within your voucher limit; 3) will pass our HUD inspection and 4) you would like to use your voucher there- you can submit your current lease with the completed RFTA and "lease-in-place" with your voucher until the end of your current lease. It will be up to you at the end of your lease to request a moving voucher and move or stay in your current unit.
- ✓ If the gross rent of the unit is more than your gross rent voucher limit, we will NOT be able to process the paperwork. We will let the housing provider know the amount it is over and see if they are able to decrease the contract rent to make it fit within your voucher limit. If they are not able/willing to do so, we will not be able to process the unit and you must look elsewhere*

*See Reasonable Accommodations for possible exceptions to this HUD regulation

I turned in my
RFTA and
lease, what
happens
now?

After the Housing Specialist determines all paperwork is complete and the unit fits within your voucher limit, the unit information will be sent to the CDA Housing Inspector

- The inspector will reach out to the housing provider to set up the unit inspection
 - If you are leasing-in-place, the inspector will be notified and will reach out to you directly to set up an inspection date and time
- Once the unit has passed inspection, you will be notified by CDA by email or telephone with approval to sign the residential lease
- A copy of the signed lease must be sent to CDA
- After receipt of the signed lease, the Housing Specialist will draft the Housing Assistance Payments (HAP) contract to be sent to the housing provider for signature
- Once the housing provider returns the HAP contract with signature, CDA can submit for payment to be sent on our next payment disbursement
 - Payments are disbursed around the 1st and 15th of each month

How much is my rent portion?

- ❖ When your unit paperwork is sent to the inspector, your housing specialist will contact you and your landlord with an **estimated** breakdown rent
- ❖ Once the HAP contract is sent to the housing provider for signature, a Rent Change Notice will be sent to you with the official rent breakdown
- ❖ Tenant rent portion is to be paid directly to the housing provider in the manner(s) set forth in the rental lease agreement

**Community Development Authority
of the City of Madison**
215 Martin Luther King, Jr. Boulevard Suite 161
Madison, Wisconsin 53705
(608) 266-4675

Rent Change Notice

06/24/2026

Resident ID: [REDACTED]
Voucher #: [REDACTED]

[REDACTED]
Madison WI 53713

Dear [REDACTED]

An examination of your housing assistance has been completed. The following is the determination:

Total Contract Rent:	1,155.00	Previous Contract Rent:
Total Resident Rent:	282.00	Previous Resident Rent:
Housing Assistance Payments:	873.00	Previous Housing Assistance Payments:
Utility Reimbursement:	0.00	Previous Utility Reimbursement:

Effective Date: 03/28/2026

If you have any questions regarding this determination, please write to or call our office. If you find the calculation to be in error, you have the right to request (in writing) an informal hearing with ten (10) days of the date of this notice.

Sincerely,

Quashawna Mitchell

CC
BURR OAKS SENIOR HOUSING LLC
2810 Walton Commons Lane
Madison WI 53718

Owner ID: V615383

Housing Assistance Payments (HAP) Contract

This is the contract that is signed between the CDA and the housing provider.

CDA cannot release payment to your housing provider until this contract is returned to CDA with signature

Part A: Contract Information

Part B: Body of Contract

Part C: Tenancy Addendum

Housing Assistance Payments Contract (HAP Contract) Section 8 Tenant-Based Assistance Housing Choice Voucher Program

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Part A of the HAP Contract: Contract Information

(To prepare the contract, fill out all contract information in Part A.)

1. **Contents of Contract**

This HAP contract has three parts:

- Part A: Contract Information
- Part B: Body of Contract
- Part C: Tenancy Addendum

2. **Tenant**

[Redacted]

3. **Contract Unit**

[Redacted]

4. **Household**

The following persons may reside in the unit. Other persons may not be added to the household without prior written approval of the owner and the PHA.

[Redacted]

5. **Initial Lease Term**

The initial lease term begins on (mm/dd/yyyy): [Redacted]

The initial lease term ends on (mm/dd/yyyy): [Redacted]

6. **Initial Rent to Owner**

The initial rent to owner is: \$ [Redacted]

During the initial lease term, the owner may not raise the rent to owner.

7. **Initial Housing Assistance Payment**

The HAP contract term commences on the first day of the initial lease term. At the beginning of the HAP contract term, the amount of the housing assistance payment by the PHA to the owner is \$ [Redacted] per month. The amount of the monthly housing assistance payment by the PHA to the owner is subject to change during the HAP contract term in accordance with HUD requirements.

HAP Contract: Tenancy Addendum

The tenancy addendum is to be attached to the residential lease between the tenant and housing provider and becomes an addendum to that lease.

Housing Assistance Payments Contract (HAP Contract) Section 8 Tenant-Based Assistance Housing Choice Voucher Program

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Part C of HAP Contract: Tenancy Addendum

1. Section 8 Voucher Program

- a. The owner is leasing the contract unit to the tenant for occupancy by the tenant's family with assistance for a tenancy under the Section 8 housing choice voucher program (voucher program) of the United States Department of Housing and Urban Development (HUD).
- b. The owner has entered into a Housing Assistance Payments Contract (HAP contract) with the PHA under the voucher program. Under the HAP contract, the PHA will make housing assistance payments to the owner to assist the tenant in leasing the unit from the owner.

2. Lease

- a. The owner has given the PHA a copy of the lease, including any revisions agreed by the owner and the tenant. The owner certifies that the terms of the lease are in accordance with all provisions of the HAP contract and that the lease includes the tenancy addendum.
- b. The tenant shall have the right to enforce the tenancy addendum against the owner. If there is any conflict between the tenancy addendum and any other provisions of the lease, the language of the tenancy addendum shall control.

3. Use of Contract Unit

- a. During the lease term, the family will reside in the contract unit with assistance under the voucher program.
- b. The composition of the household must be approved by the PHA. The family must promptly inform the PHA of the birth, adoption or court-awarded custody of a child. Other persons may not be added to the household without prior written approval of the owner and the PHA.
- c. The contract unit may only be used for residence by the PHA-approved household members. The unit must be the family's only residence. Members of the household may engage in legal profit making activities incidental to primary use of the unit for residence by members of the family.
- d. The tenant may not sublease or let the unit.
- e. The tenant may not assign the lease or transfer the unit.

4. Rent to Owner

- a. The initial rent to owner may not exceed the amount approved by the PHA in accordance with HUD requirements.
- b. Changes in the rent to owner shall be determined by the provisions of the lease. However, the owner may not raise the rent during the initial term of the lease.
- c. During the term of the lease (including the initial term of the lease and any extension term), the rent to owner may at no time exceed:

- (1) The reasonable rent for the unit as most recently determined or redetermined by the PHA in accordance with HUD requirements, or
- (2) Rent charged by the owner for comparable unassisted units in the premises.

5. Family Payment to Owner

- a. The family is responsible for paying the owner any portion of the rent to owner that is not covered by the PHA housing assistance payment.
- b. Each month, the PHA will make a housing assistance payment to the owner on behalf of the family in accordance with the HAP contract. The amount of the monthly housing assistance payment will be determined by the PHA in accordance with HUD requirements for a tenancy under the Section 8 voucher program.
- c. The monthly housing assistance payment shall be credited against the monthly rent to owner for the contract unit.
- d. The tenant is not responsible for paying the portion of rent to owner covered by the PHA housing assistance payment under the HAP contract between the owner and the PHA. A PHA failure to pay the housing assistance payment to the owner is not a violation of the lease. The owner may not terminate the tenancy for nonpayment of the PHA housing assistance payment.
- e. The owner may not charge or accept, from the family or from any other source, any payment for rent of the unit in addition to the rent to owner. Rent to owner includes all housing services, maintenance, utilities and appliances to be provided and paid by the owner in accordance with the lease.
- f. The owner must immediately return any excess rent payment to the tenant.

6. Other Fees and Charges

- a. Rent to owner does not include cost of any meals or supportive services or furniture which may be provided by the owner.
- b. The owner may not require the tenant or family members to pay charges for any meals or supportive services or furniture which may be provided by the owner. Nonpayment of any such charges is not grounds for termination of tenancy.
- c. The owner may not charge the tenant extra amounts for items customarily included in rent to owner in the locality, or provided at no additional cost to unsubsidized tenants in the premises.

7. Maintenance, Utilities, and Other Services

- a. **Maintenance**
 - (1) The owner must maintain the unit and premises in accordance with the HQS.
 - (2) Maintenance and replacement (including redecoration) must be in accordance with the

Reasonable Accommodation

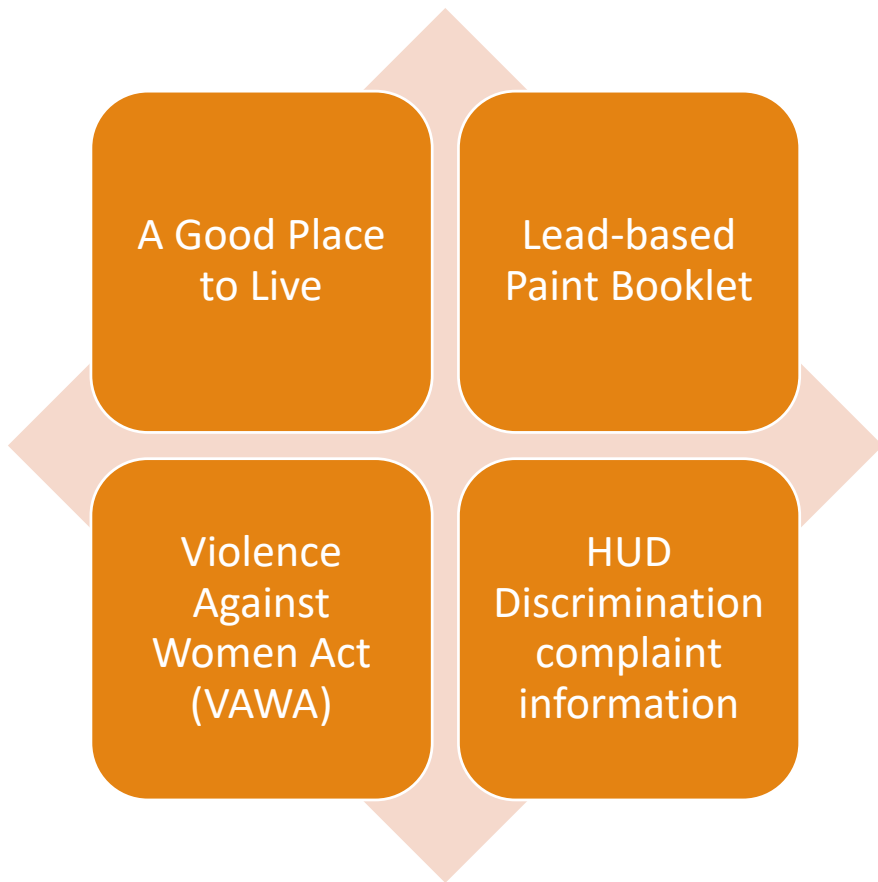
If an applicant or participant indicates that an exception, change or adjustment to a rule, policy, practice, or service is needed because of a disability, HUD requires that CDA treat the information as a request for a Reasonable Accommodation.

The applicant or participant family must explain what type of accommodation is needed to provide the person with the disability full access to the CDA's programs and services

Examples of Reasonable Accommodations


- Additional search time on voucher
 - Approval for Live-In-Aide
- Approval for additional/separate bedroom
 - Exception (higher) payment standard






Additional
BRIEFING
PACKET
INFORMATION

Things to keep in mind...

- CDA does not assist with application fees nor security deposits
 - Do NOT sign the lease until CDA informs you that that the unit has passed inspection and the rent is determined to be reasonable
 - Make sure to complete your unit check-in form and return to your landlord
- 

Additional things to keep in mind...

- You will be required to recertify your income/assets/expenses on a yearly basis and failure to comply can result in termination of your assistance
 - Your unit will be scheduled for a HUD inspection at least once every 2 years and must be in compliance for housing assistance payments to continue
- 

Voucher Briefing Certificate

To be completed by the voucher holder:

- 1) Indicate how you would like to receive your voucher documents and provide email address or mailing address
- 2) Print full name
- 3) Sign full name
- 4) Date document



CommunityDevelopmentAuthority

215 Martin Luther King Jr., Blvd., Suite 161
Madison, Wisconsin 53703
ph (608)266.4675 tdd (608)264.9290 fx (608)264.9291
email housing@cityofmadison.com
mail P.O. Box 1785, Madison, WI 53701-1785

SECTION 8 HOUSING CHOICE VOUCHER BRIEFING CERTIFICATE

By signing this document, I acknowledge that I have viewed the Section 8 Housing Voucher Briefing video and reviewed the program materials. I acknowledge that all pertinent Section 8 regulations were explained in the voucher briefing video. I confirm that I will abide by all Section 8 rules and regulations and understand that if not followed, I may be terminated from the Section 8 voucher program. If I have any additional questions after receiving my voucher documents, I will reach out to the assigned CDA Housing Specialist listed on my voucher documentation.

I would like to receive my voucher documents by:

- Email (please provide email address)

- US mail (please provide address)

Print name

Sign name

Date

Return both documents to:
Mail: PO Box 1785 Madison, WI 53703-1785
Email: CDABriefings@cityofmadison.com
Fax: 608-264-9291

NEXT STEPS

**Submit your completed documentation to the CDA office by the
deadline listed on your briefing letter**

- RESPONSIBILITY AGREEMENT
- BRIEFING CERTIFICATE

Documents can be submitted by email, fax, US mail or dropped off at our office:

Email: CDABriefings@cityofmadison.com

CDA-City of Madison

215 Martin Luther King Jr. Blvd. Ste 161

Madison, WI 53703

Fax: 608-264-9291

- Office Hours: Monday- Thursday, 8:00 am- 4:30 pm
- Office suite drop box hours: Monday-Friday, 8:00 am- 4:30 pm

Once CDA has received your documentation, your Housing Specialist will send the following documents within 10 business days by the manner you indicated on your briefing certificate:



1) VOUCHER- You must sign, date and submit a copy to your assigned housing specialist



2) REQUEST FOR TEANANCY APPROVAL (RFTA) FORM- This form needs to be completed by the housing provider/landlord and returned to CDA along with a copy of the proposed, unsigned 12-month lease for the unit you wish to rent. This form must also be signed by the voucher holder in order for CDA to proceed with processing the unit upon receipt.



3) GROSS RENT VOUCHER LIMIT CALCULATION- This shows your voucher bedroom size, gross rent (contract rent + unit utility allowance) voucher limit and the calculations of 30% and 40% of your monthly adjusted income



4) UTILITY ALLOWANCE WORKSHEETS- Make sure to utilize the worksheet that matches with the unit type you are looking to rent. If you are looking at a unit smaller than your voucher size, use the actual unit size. If you are looking at a unit larger than your voucher size, use your actual voucher size



Section 8 staff contact information

Residents & Voucher Holders

Pay CDA Rent

Public Housing Residents +

Parkside and Karabis Residents

Section 8 -

Housing Specialists

Contact your Housing Specialist

Section 8 Specialists are **only** available through a scheduled appointment or during the walk-in schedule.

Housing Specialist	Phone	Walk-in Schedule
LaQuella Etchin	608-264-9261	Monday, 1:00pm – 4:00pm
Paul Hermann	608-267-1146	Monday, 1:00pm – 4:00pm

<https://www.cityofmadison.com/dpced/housing/residents-voucher-holders/section-8/contact-your-housing-specialist>

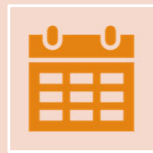
GOALS FOR TODAY:



To learn how the Section 8 Program (also known as “Housing Choice Voucher” program) functions



To take the information learned today to successfully use your voucher and fulfill your responsibilities as a voucher holder



To review, initial, sign and date my **Responsibility Agreement and Briefing Certificate – and submit copies to CDA by my assigned due date**



Thank you!
